

Town Of Frederica
P.O. Box 294
Frederica, DE 19946
(302) 335-5417

Application for Rental Property License

Name of Property owner: _____

Address: _____

Phone: _____ Cell Phone: _____

Property Address: _____

House: _____ Apartment: _____ Business: _____ # of Units: _____

Number of bedrooms: _____ Bathrooms#: _____ Total number of rooms: _____

Type of heat: _____ Type of hot water _____

Number of off street parking: _____

Renter will pay trash and water: _____ Yes _____ No If so, please advise as to renters name and address and if they should receive a bill.

Owners Signature: _____

Date of code inspection: _____

Acceptable: _____

Non acceptable: _____

Violations: _____

Code Enforcer Signature: _____

Fee Paid: \$75.00 Per Unit Due at time of Application
NON REFUNDABLE

Approved By Mayor and Council on: _____

Denied on: _____

Reasons for Denial: _____